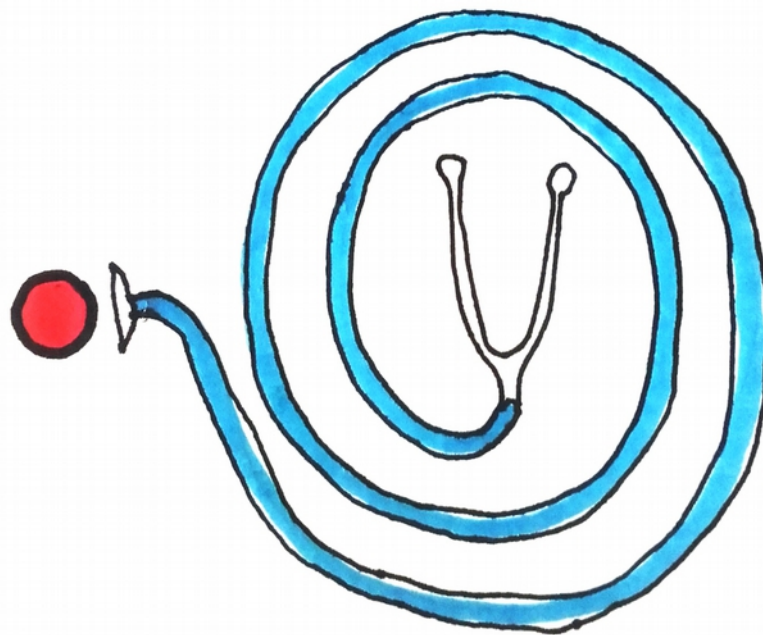


# **Best Practices in The Integration of Hospital Clowns into the Healthcare Environment**



A report by

**Suzie Ferguson**

**Winston Churchill Fellow 2016**

WINSTON  
CHURCHILL  
MEMORIAL  
TRUST

# CONTENTS

<b>Acknowledgements &amp; About Me</b> .....	2
<b>Executive Summary</b> .....	4
<b>Introduction</b> .....	5
<b>Method</b> .....	7
<b>Summary of Key Findings</b> .....	9
<b>Theme 1: Education</b> .....	10
Case Study 1.1.....	11
Case Study 1.2.....	12
<b>Theme 2: Quality</b> .....	15
Case Study 2.1.....	16
Case Study 2.2.....	17
Case Study 2.3.....	18
<b>Theme 3: Reach</b> .....	20
Case Study 3.1.....	21
<b>Theme 4: Trust</b> .....	23
Case Study 4.1.....	24
Case Study 4.2.....	25
<b>Theme 5: Research</b> .....	26
Case Study 5.1.....	27
<b>Theme 6: Communication</b> .....	29
Case Study 6.1.....	30
Case Study 6.2.....	31
<b>Theme 7: Government Policy</b> .....	33
Case Study 7.1.....	34
<b>Conclusion</b> .....	35
<b>Recommendations</b> .....	36
<b>Impact and Dissemination</b> .....	40
<b>Appendix</b> .....	41

# ACKNOWLEDGEMENTS

Thank you to the Winston Churchill Memorial Trust for giving me this wonderful opportunity. I was humbled to receive the award, and I sincerely hope I can do it justice.

Many thanks to Hearts & Minds team who have encouraged me to embark on this research project, and especially to my clown family at Hearts & Minds who continually inspire and support me, and who took on extra days in hospital to cover for my time away.

Thanks to Alegría Intensiva, Operação Nariz Vermelho, Le Rire Médecin and Pallapupas for their huge generosity in hosting and sharing their work with me. Special thanks goes to the clowns who let me into their world and allowed me to observe their delicate work in hospital.

Huge thanks also goes to Fergus Dunnet for his continual encouragement and support, and to Kirstin Ashton, Angus Ferguson and Jo Wright.

## **About Me**

I am a freelance performer and theatre maker, specialising in Clown and Street Performance.

After graduating from Glasgow University with a 2:1 degree in Hispanic Studies, I moved to Barcelona and trained in Clowning. I worked as a street performer there and around Europe until 2010, when I returned to Glasgow and co-devised and performed SICK, a one women clown show exploring the experience of being ill and in hospital, with Martin Danziger (Modo). For this, I was nominated for a CATS award for best female performance. In 2010 I also started work as a Clowndoctor with Hearts & Minds, where I am now a Senior Practitioner, working as both Clowndoctor and Elderflower. I am also a performer and creative collaborator in Curious Shoes, a bespoke performance made for people living with dementia and their carers.

As well as my work with Hearts & Minds, I am a collaborator and performer with Tenterhooks (Call of Nature, Werewomen) and a performer with Mischief la Bas (The Magnificent Organ, The Scone of Destiny).

# ● EXECUTIVE SUMMARY ●

Can we reach a model of holistic health care in the UK where doctor and clown work side by side for the benefit of the patient? This research project focussed on best practices in the integration of hospital clowns in Buenos Aires, Barcelona, Paris and Lisbon, and aimed to answer the following questions:

- Does research into the benefits of hospital clowning make a positive difference to the perceptions of the work to healthcare professionals?
- Does a hospital clown's presence in Surgery increase trust and therefore integration of hospital clowns more widely in the healthcare environment?
- What are best practices in increasing public understanding of hospital clowning
- How can government policy affect the integration of hospital clowns into healthcare environments?

## **Key Findings:**

- Qualitative and quantitative studies looking into the benefits of healthcare clowning would be a short hand and effective way of communicating the benefits of the specific work we do to funders and and the general public, but is not a key factor in the integration of hospital clowns into the healthcare environment.
- Good understanding and good relationships can lead to effective teamwork; for example, clowns being asked to attend medical procedures and surgery as a way of reducing anxiety/fear in the patient.
- Effectively communicating to healthcare staff, early on in their career, what we do, how we do it and why we do it has a very positive impact on the perception of hospital clowns across the board, and would be easily transferable to a UK setting.
- High artistic standards and quality of service in the delivery of healthcare clown programmes are vital, not only in the effective delivery of the work, but in setting the hospital clowns apart from other social care interventions in the hospital setting. While this is also a priority for UK healthcare clowning organisations, different models of artistic support and programme structure could also be effective and sustainable.
- Sharing the work we do with a wider public audience, who may never see it in person could lend weight to fundraising initiatives. Radio, TV, Social Media campaigns that use celebrity endorsements, and national campaigns, such as a 'National Hospital Clown Day' have been effective in raising public profile in Portugal, for example
- Government Policy is not a short cut to good integration of hospital clowns on the wards. More important than the compulsory presence of hospital clowns, per se, is the presence of professionally trained clowns, delivering a high quality service on a regular basis.

## **Recommendations following findings:**

- Building good relationships and high levels of trust with all levels of healthcare staff would increase our reach within healthcare environments, allowing us to be used to our full potential, more regularly. This would involve more regular hospital visits, more contact with healthcare staff out of costume and information sharing with hospital employees.
- Research into the benefits of healthcare clowning in Scotland would be useful, but this should be balanced against what is potentially a very time consuming and costly process. In the meantime, UK organisations can make use of international research, for example, the findings of Operação Nariz Vermelho, and other organisations that work in a similar way to Hospital Clown organisations in the UK.
- Unwavering focus on high artistic quality in the delivery of the hospital clown programme is essential, with attention paid to the continuity of clown partnerships, style of costumes and continual, targeted training.
- Social Media campaigns such as, 'National Hospital Clown Day', and 'When I grow up I want to be a Clowndoctor' endorsed by celebrities have been effective in raising awareness that hospital clowning is a profession to aspire towards in Portugal. Similar campaigns could be adapted and used in a UK setting.

# ○ INTRODUCTION ○

It may seem contradictory, but Clowns and Hospitals are a good fit. According to Wellington Nogueira, Artistic Director of Doutores de Alegria in Brazil, the partnership between Fool and Healer has been a part of humanity for Centuries. He states that the archetypes of The Fool and The Healer can be found together throughout history, as Quack Doctors, Mummer Players, Fools and Court Jesters, Medicine Men and Shaman. It was only the Industrial Age that saw the two separated - The Healer became Doctor in a white uniform, confined to the sanitised space of the hospital, and The Clown to the sawdust floored Big Top and The Circus. The two spaces could not be more different, and they remained separate until 1986, when a clown named Michael Christensen left The Big Apple Circus at the invitation of the hospital. When he entered ICU for the first time, the Chief Medical Officer said to him, 'What you are doing is good, but the ICU is no place for Clowns'. Michael replied, 'What you are doing is good, but the ICU is no place for children'<sup>1</sup>.

Here a dialogue began that continues to this day.

In their role as 'gate-keepers' our medical colleagues have a huge say on our presence on hospital wards. Even when benefits to the children are clear and understood, if doctors and nurses aren't on board, we can go no further. For example, in their 2005 study into Clowndoctors as a treatment for pre-operative anxiety, Vagnoli and Caprilli found that despite the clowns being a benefit to the child, resistance of medical personnel made it very difficult to insert the program into the operating room environment<sup>2</sup>.

It was with this relationship between Clowns and the Hospital in mind that I applied for and was awarded a Winston Churchill Travelling Fellowship. This report documents my findings, recommendations and dissemination plan following my six week trip to Buenos Aires, Barcelona, Lisbon and Paris between April 2016 and June 2017.

## **Background**

Professional Hospital Clowns at Hearts & Minds, Scotland have been visiting children's hospitals in pairs for nearly 20 years. There are now 21 clowns visiting 26 healthcare units across the country. While they also visit children in schools and hospices, this report will focus on the work of Clowndoctors in pediatric hospitals.

Hearts & Minds Clowndoctors receive referrals of children to see from the Play Specialist on each ward before changing into costume. Once changed and warmed-up, they visit each referred child, as well as those in waiting rooms and corridors. Visits might involve music, physical comedy and gentle parody of the hospital environment – they are all improvised, and the clowns are trained to follow the lead and needs of the child at all times. The result might be laughter, but also might involve relaxation and distraction. As a hospital clown, I see the benefits of the work we do first hand on

---

<sup>1</sup>Nogueira, W (November 2015) O mundo precisa de mais palhaços,  
Retrieved from: <https://www.youtube.com/watch?v=R3F98tFl-zk>

<sup>2</sup>Vagnoli L, Caprilli S (Oct 2005) [Clown doctors as a treatment for preoperative anxiety in children: a randomized, prospective study.](#)

Retrieved from: <https://www.ncbi.nlm.nih.gov/pubmed/16199685>

a regular basis. A clown's job, as it was the job of jesters in the courts of powerful kings in the Middle Ages, is to show those in power another way of seeing the world. When clowns are in hospital, a highly controlled, hierarchical, and rational environment is transformed into one filled with laughter, empathy, playfulness and imagination. Clowns are always striving to make connections, human to human, and will do so however they can. These connections often involve laughter, and laughter has been proven to be good for us. According to Sophie Scott, when we laugh, we are accessing an ancient, evolutionary system that mammals have to make and maintain emotional bonds and to regulate emotions<sup>3</sup>. Research has shown that humour helps us cope with pain, stress and adversity and what is more, Liukkonen (1994) found that humour is a meaningful factor in the day-to-day interaction of nurses and patients and more generally in patients' overall wellbeing and ability to cope with illness<sup>4</sup>.

### **Aims, Objectives and Purpose**

This research project was born of a frustration that after nearly 20 years of sending professional clowns into hospitals, hospital clown organisations in the UK still come across healthcare staff, families, and general public who have never heard of this profession, and who often mis-understand it.

My objectives were:

- To increase awareness and understanding of what professional hospital clowns do and how we do it amongst the healthcare community and the general public. How can clowns fully integrate into the healthcare system as part of a wider programme of holistic healthcare? How can we best communicate the benefits of healthcare clowning to healthcare professionals?
- To collaborate with Hospital Clown organisations, healthcare staff, NHS policy makers and stakeholders and other interested parties in the UK to effectively disseminate these findings with a view to increasing the presence, understanding and acceptance of hospital clowns in healthcare environments.
- To develop and maintain strong international working relationships with hospital clown colleagues around the world, to continue sharing ideas around best practice to enhance hospital clown integration.

---

<sup>3</sup>Scott s (March 2015) Why We Laugh

Retrieved from: [https://www.ted.com/talks/sophie\\_scott\\_why\\_we\\_laugh](https://www.ted.com/talks/sophie_scott_why_we_laugh)

<sup>4</sup>Astedt-Kurki P, Liukkonen A. (Jul 1994) Humour in nursing care.

Retrieved from: <https://www.ncbi.nlm.nih.gov/pubmed/7930119>

# ○ METHOD ○

Over the course of 6 weeks I visited Hospital Clown organisations in Buenos Aires, Lisbon, Paris and Barcelona, and attended the Healthcare Clowning International Meeting in Lisbon (HCIM). I undertook interviews and work-shadow placements to better understand how healthcare clown organisations operate. The organisations were chosen because they all operate within a similar model as Hearts & Minds, in that they all employ professional performers. They also all aim to work in collaboration with healthcare staff.

HCIM took place in Lisbon in April 2016, bringing together hospital clown organisations from around the world. This seemed to be the perfect way to mark the beginning of my Fellowship. As well as allowing me to get a sense of how other healthcare clowning organisations around the world were working and their view on integration, HCIM 2016 brought together leaders in healthcare clown research, offering unique networking opportunities, as well as useful insights into how academic research might support the Clowndoctor movement in the UK.



The Healthcare Clowning International Conference 2016 brought together hospital clowns from all over the world.

In 2016 news emerged that the government of Buenos Aires had declared Hospital Clowns to be compulsory in all pediatric services in the district<sup>5</sup>. I immediately wanted to understand what had led government to

make this policy decision. Alegria Intensiva worked closely with the government in drafting the white Paper, and I planned to talk to them in order to understand the background to this policy decision, and what impact it has had on clowning practice. I also planned to work-shadow clowns operating in this setting, to learn best-practices in interactions and partnerships with healthcare providers.

Pallapupas (Barcelona) clown in a surgical setting, and are pioneers in this work. I arranged to work-shadow them in this environment, which gave unique insights into this approach, in order to gain an understanding of the impact their work has had on patient experience, outcomes, the healthcare profession and on perceptions of the clowns. I was also interested to learn how Pallapupas gained the trust of healthcare professionals to be able to enter into such a high risk and highly controlled medical environment.

Operação Nariz Vermelho (Portugal) are one of the countries top 10 charities and seem to have an extremely effective communication strategy. I interviewed their communications manager and head of research to gain insights into how their approach might apply in a UK setting.

---

<sup>5</sup>BBC Mundo 2015 'Payasos por ley en los hospitales de Buenos Aires'

[http://www.bbc.com/mundo/noticias/2015/08/150819\\_payasos\\_buenos\\_aires\\_hospitales\\_payamedicos\\_irm](http://www.bbc.com/mundo/noticias/2015/08/150819_payasos_buenos_aires_hospitales_payamedicos_irm)

Le Rire Médecin was established 26 years ago, and has a wealth of experience in the integration of healthcare clowns into hospitals. Visiting Paris allowed me to gather examples of best practice from a well established and highly regarded organisation.

I took notes and wrote a regular blog following my visits, and also took photos.



I also had the wonderful opportunity to experience hospital clowning first hand - here is Dr Maybee (me) in action in Buenos Aires



And with Dr Gota Gota and Dra Fonenda in Barcelona

# ○ SUMMARY OF KEY FINDINGS ○

This research project has identified 7 ways in which healthcare clown organisations in the UK can increase their integration into healthcare units. In the following section of the report I will expand on each heading, providing Case Studies and Key Findings for each.

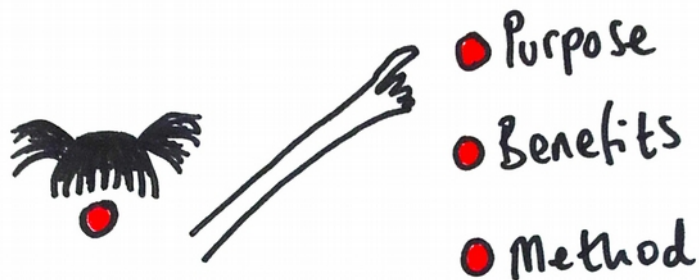
- 1. Education:** Effectively communicating to healthcare staff what we do, how we do it and why we do it.
- 2. Quality:** Maintaining high artistic standards in the delivery of healthcare clown programmes.
- 3. Trust:** Gaining the trust of healthcare staff, thus increasing our reach within healthcare environments.
- 4. Reach:** Remembering that we are there for everyone in the hospital.
- 5. Research:** Gathering qualitative and quantitative evidence that we do what we say we do.
- 6. Communication:** Sharing the work we do with a wider public audience, who may never see it in person, in order to raise private donations.
- 7. Government Policy:** Legislating on the presence of hospital clowns in a healthcare setting.

Some organisations were exemplar in one or two of these areas whilst others focussed, to a greater or lesser extent, on all of them. I hope that the case studies and key findings in the following pages will provide new ideas to existing healthcare clown organisations in the UK, and inspire them to deepen the breadth and reach of our hospital clown programmes.

A full description of all of the projects that I visited can be found on my website:

[www.suzieferguson.com/blog](http://www.suzieferguson.com/blog)

# 1 EDUCATION



Effectively communicating to healthcare staff what we do, how we do it and why we do it.

Hospital Clowning has been growing steadily over the last 30 years, with over 127 organisations registered with the European Federation of Hospital Clowns at the time of writing. Hospital Clown organisations where training is minimal or non-existent are a concern for organisations who take pride in the quality and consistency of the work they deliver, where the art of clowning is central, and where artists are paid professionals. It is a vital part of our integration into healthcare units and survival that the perception of hospital clowning amongst healthcare staff and the public is as a profession that requires training and specific skill. All of the Hospital Clown organisations I visited see the importance of some sort of 'education' or information sharing, making sure of staff's awareness of the clowns; when they visit, what their role is and their potential benefits to hospitalised children. They all targeted trainee medical staff, and reported that this had had a positive impact over the years in the reception of professional clowns on the hospital wards.

## **1.1 Case Study – Le Rire Médecin**

### **Information sharing meetings with Medical Interns**

The Le Rire Médecin team comprises of over 100 clowns, who visit hospitals across Paris, as well as in Nantes, Angers, Orléans, Tours, Nancy and Marseille (46 services in total). They visit every unit (with a few exceptions) twice a week.

Once a year the hospital clown duo organise a meeting with the new medical interns, a month after the new intake have settled into the hospital. This is an informal event, advertised by a poster printed by the ward clerk and pinned to the staff noticeboard, arranged at a time that fits with the schedules of the interns. The clown duo provide sweets and fizzy drinks, and some Le Rire Médecin leaflets. First names are exchanged, and then the Le Rire Médecin hospital clowns give some background to the hospital clown movement and explain the qualifications and training involved in becoming a hospital clown, the reason why clowning as an art form is used in a healthcare context, and the benefits of the clowndoctor's presence to children, staff and families.

In this particular meeting, an intern was able to ask the hospital clowns how they had approached an interaction with an Autistic boy on the ward with whom she was struggling to work. After the meeting, the hospital clowns noted that interns are often extremely stressed and inexperienced when they start and relish the opportunity to find more playful ways of interacting with patients.

In this way, everyone on the ward is able to go about their work with mutual respect and understanding of what is taking place and why.



Interns at Jean Verdier Hospital, Paris, attending an information sharing meeting with Le Rire Médecin

## 1.2 Case Study - Pallapupas

### University elective in how clowning can be used in a healthcare setting

Pallapupas run a 3 month long 3<sup>rd</sup> year elective entitled, 'Noves Eines per a la intervenció en el món Hospitalari' (New tools for interventions in the hospital world) at the University of Barcelona Faculty of Medicine. The first session is a lecture given by the Director of Pallapupas, giving background and context to the organisation. At the end of this session, a pair of hospital clowns enter the lecture hall, disrupt everything and make people laugh. Then they take off their noses and talk to the students about hospital clowning, why they do it and how.

They then do a series of role plays with the student doctors carrying out minor surgical or medical procedures. They all reflect on any successes and challenges, and then do it again with the Clowndoctors present.

The aim of this course is to educate the medical staff on the role and benefits of the hospital clowns. Their presence during these procedures can reduce anxiety with games that encourage children to stay still, or breath deeply, or look the other way from a needle, for example. And also to help and encourage staff to be more playful and human in their role as Doctor.

The rest of the course focusses on beginners clown training. The idea is that interactions between healthcare staff and patients become less stressful, allowing patients to live their illness in a different, better way.

Pallapupas emphasise that the hospital clowns are there to make the medical professionals lives easier too. If they can't work together, then they can't achieve anything.



Role Play with medical interns at a Pallapupas workshop  
(Photo from [www.pallapupas.org](http://www.pallapupas.org))



Staff and families enjoy a visit from the Pallapupas hospital clowns in the Hospital Sant Joan de Déu.

## **Key Findings**

- Le Rire Médecin's annual meetings with medical interns seems to be very effective. It takes very little time and organisation, so the clowndoctors can do it on a voluntary basis at the end of their working day. The clowns meet the doctors early in their careers and establish themselves right away as valuable members of the team.
- Pallapupas' University elective is extremely popular and is now oversubscribed. Teaching electives in a university setting has been a powerful way for them to increase understanding and lend weight to the importance of the work of Pallapupas hospital clowns. According to Xaví Estrada, it has a positive impact on the healthcare environment as a whole, as medics and nurses can connect with playful ways of interacting with children and their families as well as use the hospital clowns working on the wards to their full potential.

# 2 QUALITY



Maintaining high artistic standards in the delivery of healthcare clown programmes

As freelance performers, with no director to give notes on our performance at the end of each day, maintaining high artistic standards is a central challenge to our work. If we don't make young people, parents and staff laugh, or we don't calm an anxious child, or if we play the same song each time we visit, then staff will be less likely to be interested in our presence on the ward. The fact that we are frequently working with some of the most vulnerable people in society over the course of many years also means we are at risk of 'burn-out'. This clearly has personal implications, but importantly it is hugely detrimental to the quality of work. The organisations that I visited had differing approaches to maintaining high artistic standards, but all agreed that this was a central part of hospital clowns being valued by the hospital community.

## 2.1 Case Study - Le Rire Médecin Artistic Coaching

Artistic coaching involves all of the clowns having a common artistic language and all of the clowns having the right to at least 2 artistic coaching sessions per year. An artistic coaching session involves a designated coach (a more experienced hospital clown colleague, with specific training in how to be a coach) coming and observing a day when you are working on the wards. The clown and coach agree specific artistic goals to focus on, and after the session, the coach writes a report. The coaches are also entitled to this support.

At the heart of it is very practical, tangible artistic support with goals that are clear and achievable. Over the years, Le Rire Medécin coaches have identified and worked on general artistic themes they felt the whole team could do with focussing on - Indirect Play (playing as a duo, where a shy child can see the game, but doesn't feel pressure to take part), Complicity (saying yes, and not always playing conflict in a partnership) and playing High Status (being the boss in a partnership, and finding the comedy in this).

As part of this process, the artistic team participate in writing workshops, to help reflect on their work and analyse it effectively. There is an emphasis and investment in the importance of reflection and analysis as an artistic learning tool.



Dr Mimi-Trompette and Dr Dijon warming up before a day on the wards at Trousseau Hospital, Paris

## 2.2 Case Study - Operação Nariz Vermelho

### Continuity of Partnerships

Operação Nariz Vermelho timetable the same clown duo in the same hospital for 2 months. At the end of this time period, one clown moves on to another hospital, and the other stays, so there is always a high degree of continuity. The Hospital clowns give their availability 2 months in advance, and are only allowed to change one shift per 2 month period. Each clown is guaranteed 8-10 shifts per month.

Continuity of partnerships is beneficial in two ways. Fernando Terra (Dr Kotonete) said that they are able to build clear games, status and relationships with each other, the children they visit, and with staff. Games can build from session to session, over weeks. A good, strong and supportive partnership is the key to a good day on the floor as a hospital clown. This is often hard to achieve when you work with different people each week, even as highly trained artists. The Operação Nariz Vermelho clowns also saw it as an important part of their relationships with staff. Staff know what to expect, and can build their own relationships with the practitioners in and out of costume, and as a result, can be more playful.



Operação Nariz Vermelho clowns, Dra C. Lavi and Dr Kotonete, play with one of the senior consultants on the children's ward at the Instituto Português de Oncologia

## 2.3 Case Study - Alegría Intensiva

### Costumes and Style

In all of the hospitals that I visited, Doctors still wear white coats to work. In fact in some hospitals, everyone seems to wear a white coat of some sort. This makes it very difficult to differentiate between doctors, nurses and auxiliary staff. But it also means that the fact that the Clowndoctors wear white coats too is a strong parody. The white doctors coat combined with a red nose is immediately funny and a clear invitation to play.

Costume style, alongside a clear artistic vision, can have a strong impact on how Clowndoctors are perceived on the wards. It is a basic and universal professional standard that all professional Clowndoctors arrive to work with clean and ironed costumes. But individual style is also important. Alegría Intensiva give great care and attention to their aesthetic. Costumes are of a theatre clown tradition, and bare no relation to party or circus clowns. They don't carry colourful scarves hanging out of their pockets or colourful toys or bags. They look smart and slightly old-fashioned, wearing bright dresses, or a shirt and tie, with small details that make you smile. There are no 'gags' – all of the clowning comes from within, in the physicality of their performance and their presence when they are on the wards.



Dr Perla and Dr Bernardo at a child's window in the *Hospital de Niños Ricardo Gutiérrez (CABA)*

All of the Alegría Intensiva clowns wear white make-up around their eyes. In an environment where there are other hospital clown organisations operating, this is an effective way for them to set themselves apart. It also draws focus to the eyes, and gives them all a light and ageless quality, without evoking the full make-up of the circus clown.

## **Key Findings**

- Artistic Coaching encourages rigour. Artists are expected to have clear goals that they want to achieve artistically. To have these they have to carefully consider how they work and what they do on the floor and how they want to improve. It strikes me as a very sustainable, targeted and efficient system of creative support.
- Frequent visits by the same clown duo to the same wards creates an environment where staff know and trust the clowns. Staff feel able and happy to play and interact, which makes them much less intimidating for hospitalised children. When children see their doctor sing, dance, be naughty, they can also see them as human.
- Keeping the Doctor parody in mind when choosing costumes makes hospital clowns more approachable, and less open to circus and party clown comparisons.

## **Limitations**

- An Artistic Coaching programme would require commitment from artists and specific training for coaches and the artistic team as a whole. Ideally, the coaching programme would go alongside existing artistic support and rehearsal days, and this has financial implications.
- Continuity of partnerships requires commitment from freelance artists to prioritise hospital clown work, which only represents 2 or three days work a week. At present, hospital clowns have the right to take time away from the rota to fulfill other projects, or to swap shifts if last minute work comes up. A balance needs to be struck between artists need for flexibility, and the artistic integrity of the rota.



Remembering that we are in the hospital for everyone

Spending more time in costume in the more public and public facing areas of the hospital is an effective way of widening understanding of the work we do. All of the hospital clown organisations we visited passed through large waiting rooms, some also took in adult services within the hospital.

### 3.1 Case Study - Alegría Intensiva Waiting Rooms and Public Spaces

The Alegría Intensiva Clowns concentrate about half of their day to the waiting areas in the hospitals they visit. These spaces are usually full, with parents and children who might have been waiting for hours already, will have hours more to wait, and who may have travelled for many miles to be there.

As well as these people, Alegría Intensiva interact with reception staff, cleaning staff, passing administration staff, doctors and nurses. In this way, the general public can see Clowndoctors interacting with everybody, breaking down hierarchies and humanising the hospital space.

From what I saw, they use simple, non-verbal clown games in these spaces. The effect was often remarkable. A room that was full of anxious people, with their heads lowered, or with parents watching their children, was transformed into one where people were making eye contact with each other, laughing. The extra bonus to clowning in this scenario is that periodically, a doctor will emerge to call somebody in to be seen. Alegría Intensiva play with this beautifully, singing a song for the Doctor, for example. In this instance, the Doctor stood and listened, in front of maybe 50 people in the waiting room, and was transformed from high status medical professional to humble, relatable human. Everyone going into her consultant room from then on would have something in common, beyond their doctor/patient relationship. The doctor has a playful way of engaging with her young patient, and the young patient might feel less intimidated by the doctor.



Dr Perla and Dr Bernardo playing with reception staff, while a big crowd gathers to watch.



Dr Aerosmith and Dra Nivea Pons entertaining a busy waiting room in the Hospital Pedro Elizalde, Casa Cuna.

## **Key Findings**

- Interactions in waiting areas are very simple and beneficial on various levels:
  - Patients and parents relax and are distracted from waiting, and have something to talk about once the interaction is over.
  - Doctors are humanised and have an opportunity to be playful. Patient and Doctor have something new in common that is funny.
  - Gaining the trust of healthcare staff, and increasing our reach within healthcare environments

## **Limitations**

- For hospital clowns to be able to spend time visiting waiting areas in hospitals, they would require more time – this might represent extra days in hospital, which has financial consequences. It would also require a change in timetabling, to make sure that clowns are present when the waiting rooms are at their most busy.



Gaining the trust of healthcare staff, thus increasing our reach within healthcare environments

“We go into hospital each day to make friends with everybody” Xavi Estrada, Artistic Director of Pallapupas. Trust between clown professionals and healthcare professionals is vital in the effective integration of clowns into the hospital environment. All of the organisations that I visited had good relationships with the hospitals that they worked in. They also all received handovers from the Nurse in charge before visiting children.

The following examples demonstrate specific strategies, some big, some small, that seem to have a positive impact on gaining the trust and understanding of medical staff.

## 4.1 Case Study – Pallapupas Frequency of Visits

Pallapupas visit Hospital Sant Joan de Deu five days a week. A duo works in surgery every morning, another duo visits the day hospital every morning, and two afternoons, and a duo visits a different ward each afternoon of the week.

Xaví Estrada, Artistic Director was clear that this high frequency of visits is absolutely key in the level of trust and integration they experience in the hospital. They see themselves as playing a central role in the emotional wellbeing of the hospital as a whole, and it is clear that the healthcare staff see it that way too - the clowns seem to be part of the team.

The frequency of visits and the visibility of the clowns led to Pallapupas accompanying children into surgery. The medical team often saw Pallapupas assisting in medical procedures in the Hospital de Dia – distracting children when they were getting injections or lines put in. They were impressed by their level of professionalism, and by the fact that it made the nurses jobs easier (less anxiety, less attempts to put a line in because the child is relaxed/not moving). Surgical staff saw that this approach could easily be transferred to a surgical setting.



Clowndoctors accompanying a child into surgery (photo:

Initially the clowns visited children as they were waiting for surgery. But they found that the moment of separation (as children were taken to surgery) was made worse, as they had built relations with the clowns, so the medical team suggested that the clowns come into surgery too. They changed quickly and went in. It was a success.

The team focussed in on what needed to happen with each child through trial and error, hand in hand with the medical team. It didn't always go smoothly, but now they have a clear methodology that works for everybody.



Clowndoctors continue their game with the patient until they have been anaesthetised in the surgical room.

The Pallapupas surgery programme was a total collaboration between medical team and the clowns. It works because it grew organically, with time and with trust.

## **4.2 Case Study – Le Rire Medecin, Pallapupas, Operação Nariz Vermelho Timing, Eating and Changing**

As with Hearts & Minds, all the organisations that I visited had a fixed timetable for the day that they followed, so that staff would know when to expect them. They also start their day in the morning and break for lunch. This means they have more contact with doctors doing their rounds, and have more children to see in the Day Hospital, as appointments tend to be in the morning, with children either admitted onto the ward, or sent home by lunchtime.

Le Rire Médecin have their own rooms for changing in, which they decorate, can leave things in, keep paperwork in, and eat their lunch in.

Pallapupas have their own lockers and security passes, so have access, without asking permission, to go into staff only corridors and onto wards.

Pallapupas and Operação Nariz Vermelho eat their lunch in the staff canteen at the end of their shift – lunch is the most important meal of the day here. The Spanish and Portuguese Clowndoctors were shocked to hear that we quickly eat a sandwich at midday before heading out onto the floor!

### **Key Findings**

- Increased presence of hospital clowns on the wards leads to more demand. Staff see the benefits more frequently and trust is built. Partnerships between staff and clowns lead to a more positive environment for all stakeholders.
- Hospital Clowns presence in surgery reflects the culture of the hospital as a whole, and how receptive medical staff are to a more holistic approach to healthcare. In Barcelona, medical staff were effusive about the positive impact the clowns have on children going into surgery. They see the professionalism and sensitivity of the clowns and that children are happier and less anxious as a result of their presence. They also see that this can be balanced with the highly controlled environment and strict hygiene measures of the surgical rooms.
- Hospital Clown's with security passes or keys to enter locked wards seemed to be accepted more as part of the wider healthcare team.
- Mealtimes were are an opportunity to connect 'off the floor' and in a more casual context with healthcare staff. These small interactions seem to make all the difference over time.

### **Limitations**

- Meal times are taken on a more casual basis in UK hospitals, in staff rooms on each ward. Staff often socialise and eat with their direct co-workers – auxiliary staff with auxiliary staff, for example, especially in larger children's hospitals.

# 5 RESEARCH



Research studies investigating the benefits of clowns in hospital

At the time of this research project, Operação Nariz Vermelho had just launched their research findings, 'O Rir é o Melhor Remédio?'. Le Rire Médecin have also undertaken research projects, and there was a perception amongst all hospital clown organisations visited that having their own research would be beneficial, and give scientific weight to the work the clowns do in hospitals, contribute to the perception of clowning in hospital as a profession that requires training, and represents value for money, and have a positive impact on relations with healthcare staff.

## **5.1 Case Study: Operação Nariz Vermelho Is Laughter the Best Medicine?**

Beatiz Quintella (founder of Operação Nariz Vermelho) and Susana Ribeiro (Head of Research) started their research project in 2009, and their mission was to increase knowledge of the work, to be able to spread that knowledge to people who don't witness its effects and to have scientific approval. They designed a research project with academics on board from the outset, and with Doutores de Alegria as consultants.

The idea was to start working in a new hospital in Braga, financed by a Brazil/Portugal Social Exchange Fund. What started as a 3 year research project in one hospital, grew into a research project that spans all Operação Nariz Vermelho's hospitals, includes 6 different studies and has taken 6 years.

Susana identified that one of the main reasons for this success was the good partnerships between Morgana Masetti in Brazil, academics in Portugal, the Centro de Investigação em Educação da Universidade do Minho and the Instituto Universitário de Lisboa.

The research they have undertaken is comprehensive:

- MA degree concerning the expectations of healthcare professionals before the Clowndoctors started work in Braga
- MA Degree two and a half years later to assess whether the clowndoctors reached those expectations
- Phd that focussed on the actual work in Braga and how the children responded to the Clowndoctors.
- Phd in oncology to look at the effect of clowning in this specific context.
- Phd looking into the perceptions of healthcare staff of effect of the Clowndoctors on children, parents and themselves. This was done in collaboration with Morgana Masetti in Brazil, who has done similar studies with Doutores de Alegria. This study took in 10 hospitals and gained more than 300 responses.
- MA degree studying the perspective of the clowns –their difficulties, necessities and worries in relation to the work. This study is nearing completion now.

Operação Nariz Vermelho's priority was to get their findings out into the public domain in an open and accessible way. They published a book ('Rir é o Melhor Remédio?') with the results in both English and Portuguese, that is easily digestible to a non-academic audience. They distributed this to all of the units they work in, giving copies to staff after they presented their findings. They have also presented the data and distributed the book at the national paediatrics conference in Portugal.

From a fundraising perspective, Operação Nariz Vermelho are able to communicate serious content about the Clowndoctors, which helps people to see them as professionals. The results reflect the quality of the work, the training and the skill and expertise that goes into it.

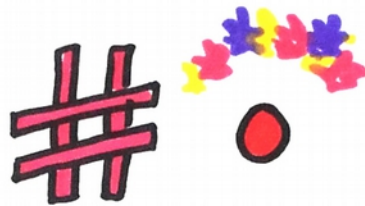
## **Key Findings**

- Comprehensive research is a great tool for assessing the quality and benefits of the work of Hospital Clowns, and for sharing this information with the general public and funders.
- Co-ordinating and disseminating this research project is a full time job for Susana Ribeira.

## **Limitations**

- It is not clear if academic research is a significant factor in the integration of clowns in hospital. It is possible that a larger number of hospital staff will be influenced by what they see and experience first hand than those who read an academic study relating to hospital clowns. In addition, staff who read such a study probably already have an interest in the work.
- Without a grant dedicated to gathering scientific evidence of the benefits of hospital clowning in a pediatric setting in the UK, it would be a huge financial commitment for a small charity to undertake.

# 6 COMMUNICATION



Sharing the work we do with a wider public audience, who may never see it in person

Communicating that hospital clowning is a profession that requires training and that the hospital clowns work in collaboration with hospitals and healthcare staff was a priority for several of the hospital clown organisations that I visited. From a fundraising perspective it was deemed important to set the hospital clowns apart from entertainment available on the wards.

## 6.1 Case Study - Alegría Intensiva

### Public endorsement from medical professionals

Alegría Intensiva was founded by two medical professionals and two professional clowns. This relationship has meant that from the start, they have been able to communicate effectively with hospitals, and establish solid relationships built on mutual respect and understanding.

A compelling public television interview, with the director of Alegría Intensiva and the chairman of the board of directors for one of the main paediatric hospitals in Buenos Aires, explained the many benefits of professional clowns in hospital<sup>6</sup>. The doctor emphasised that Alegría Intensiva are a part of the medical team, and vital to the wellbeing of the young people in hospital giving real weight to the work of hospital clowns. This is a key and central part of Alegría Intensiva's communications strategy – to feature in national newspapers, magazines and television programmes, talking about the benefits of the work from a medical and professional point of view, always emphasising the teamwork between medical professional and clown professional.

Argentina has an official 'National Hospital Clown Day'. Alegría Intensiva has used this as an opportunity to get national press coverage in high profile newspapers<sup>7</sup>. Throughout the year, they also Support other 'national days', for example, National Nurse Day, or National Doctor Day on their own Social Media platforms.



Andrés Kogan (Director of Alegría Intensiva) and Dr Kambourian talk about the benefits of professional hospital clowns on Television

<sup>6</sup> (August 2017) <http://www.alegriaintensiva.org.ar/alegroterapia-en-pura-vida-cada-dia/>

<sup>7</sup><http://www.lanacion.com.ar/2016936-artistas-en-el-hospital-para-devolverle-a-los-chicos-la-risa-en-medio-del-trauma>  
April 2017

## 6.2 Case Study – Operação Nariz Vermelho

### Social Media

According to Magda Morbey Ferro, the perception of Clowning in Portugal is much the same as the UK. People immediately think of The Circus. The difference in Portugal is that the next thing they think of is the Operação Nariz Vermelho Clowndoctors.

Operação Nariz Vermelho is a 'Superbrand' in Portugal, and is one of the top 10 charities in the country. The brand was built from the beginning, alongside the artistic programme. Marketing and communications came hand in hand with the work, and the founders always had it clear in their minds that this was a central part of building their visibility.

One of Operação Nariz Vermelho's recent publicity campaigns focussed on children and celebrities saying, 'when I grow up, I want to be a Clowndoctor'.

Their focus is on educating the next generation to understand that being a Clowndoctor is a profession that you can aspire to, like any other, and to diminish the idea that anyone can put on a red nose, go into a hospital and get the same results.

The campaign involved TV and Radio spots, Social Media endorsements from celebrities, and a campaign in primary schools, where children are educated on social responsibility, and on what it is to be a Clowndoctor. Activities include creating their own Clowndoctor character.

All of Operação Nariz Vermelho's media support – their website, TV campaigns and Radio adverts is given to them in kind. While this means that they don't get prime-time coverage, they do get coverage.



Portugal's version of Red Nose Day to support Operação Nariz Vermelho, endorsed by Mr Bean!

## **Key Findings:**

- Building relationships with senior hospital staff who can speak out with authority on the benefits of hospital clowning is a key factor in lending weight to the hospital clown movement amongst healthcare professionals.
- Social Media in Portugal has a huge uptake, so their Facebook following is largely cultural, and doesn't necessarily convert into individual donations. However campaigns endorsed by celebrities such as 'National Hospital Clown Day', and 'When I grown up I want to be a Clowndoctor' have been effective in raising awareness that hospital clowning is a profession to aspire towards.
- To maintain a Social Media profile is a huge amount of work as new content is required constantly. Organisations that worked as a team in this regard, with artists sending in videos, photos and stories on a regular basis could spend more time building more targeted social media campaigns.
- In-kind support from media organisations who create content for TV and Radio has meant that Operação Nariz Vermelho has nationwide recognition.
- 'O Dia do Nariz Vermelho' (Red Nose Day) is a great annual focus for Operação Nariz Vermelho to attract attention on a national level.
- In the Social Media age, endorsement of the clowndoctor programme from young celebrities, by way of a simple internet meme, has raised the profile of hospital clowns in Portugal.

## **Limitations**

- Red Nose Day has been copyrighted in the UK and in many other countries worldwide, as has the image of a celebrity wearing a red nose, so this isn't an option as a fundraising campaign.



Legislating on the presence of hospital clowns in a healthcare setting

## 7.1 Case Study: Alegría Intensiva

### Compulsory Hospital Clowns

In August 2015, a law was passed in Buenos Aires: 'Incorporando al sistema de Salud la labor del payaso de hospital' (Incorporation of Hospital Clowns into the Health System). From the UK it seemed extremely exciting - were hospital clowns really so valued by society that their presence in hospitals should become law? Was this something that had been campaigned for by children, parents, doctors or healthcare staff? Had hospital clown organisations in Buenos Aires been lobbying parliament?

Apparently, this was nothing more than a last minute project of Ruben Dario Golia at the end of his term in office - having watched Patch Adams, and fallen in love with the concept, it was an uncontroversial and populist move, and an easy law to get passed. It had been my intention to speak to Ruben Dario Golia in person, but he was not available.

Far from celebrating, Alegría Intensiva instinctively saw this law as a potential disaster for Hospital Clowning in Argentina. They made sure that they were involved with the consultation process, and got to a place where they were at least happy that it was 'sensata' (sensible). It now ensures that Hospital Clowns should be fully trained, professional clowns who have further training in the specifics of healthcare clowning, and that they are paid. For Alegría Intensiva and other hospital clown charities working in similar ways in Buenos Aires, it was important to protect the professionalism of Hospital Clowning. They saw that a law that didn't have this at its heart would surely open the floodgates to undertrained people, and however good their intentions or big their hearts, this could only be damaging for the reputation of the profession.

Even in its current state, Mariano Rozales (Director, Alegría Intensiva) maintains that the law would only serve 'para que la gente nos odie', (to make people hate us), 'When the basic priorities of society are not being met, the hospital clown law would only serve to destroy the profession'. Healthcare trade unions are fighting all the time for adequate resources and working conditions in the province of Buenos Aires. Any law that appeared to prioritise clowns over healthcare staff would be a disaster, however well they were doing their job.

Soon after the law was approved, but before the regulation process took place, the Government changed hands, and when the new Governor came into power, they declared the state of Buenos Aires to be 'quebrada' (broken). The Hospital Clown law of the province of Buenos Aires is currently so far down the list of governmental priorities it will likely never see the light of day. And as far as Alegría Intensiva is concerned, that is cause for great relief.

One thing did come out of the process though – a National Hospital Clown Day, and much media attention into hospital clowning in Buenos Aires and Argentina.

## **Key Findings**

- A 'bottom-up' approach to change the societal view of the role that hospital clowns play in a healthcare setting would be more beneficial than a 'top-down', legislative approach.
- Governmental recognition for the work of hospital clowns, in the form of a National Hospital Clown Day, has given Alegria Intensiva a clear focus to communicate the work they do.

## **Limitations**

- Legislation to make hospital clowns compulsory in the UK would have very little impact on how hospital clowns are perceived by the healthcare community, and may have a negative effect.

# CONCLUSION

During my Winston Churchill Travelling Fellowship I have been encouraged and heartened by hospital clown organisations dedication to our integration into healthcare units, and been inspired by and learned from both the differences in approach and the great similarities in the programmes. I have seen a general consensus that integration and collaboration between hospital clowns and healthcare staff is central to the success of hospital clown programmes.

The organisations that I visited are all small charities. Balancing artistic output with the work that goes into fundraising, communication, marketing and liaison with hospitals seems to be a constant battle for all. Justifying the cost of the programmes, when there might be cheaper voluntary options available, means that there is a real imperative to raising the profile of hospital clowns as professionals who fulfil a very specific and important therapeutic role.

I was sure that hospital clown organisations should prioritise research, but having met with Operação Nariz Vermelho, I think the priority for UK organisations should be in building trust and collaborative relationships with staff in hospitals. We don't need statistics to prove why we should be working in hospitals, but best practices that mean we can deepen the work we are doing while we are there.

The potential negative impact of Government Policy on the presence of hospital clowns on pediatric wards in Buenos Aires surprised me, and I found meeting with Alegría Intensiva extremely enlightening. Where our relationships with hospital staff are so vital to our work, anything that endangers this is a concern. With the NHS constantly under pressure, hospital clowns being prioritised over healthcare staff could have equally disastrous effects on relations in the UK.

# ● RECOMMENDATIONS ●

In this section I give full details of the recommendations set out in the Executive Summary, as based on all my Key Findings. I also explain the impact I hope to make with the report; how I plan to disseminate it and an indication of what successful uptake of its recommendations might look like.

**Build good relationships and high levels of trust with all levels of healthcare staff to increase reach within healthcare environments, ensuring that hospital clowns are used to their full potential, more regularly.**

**This requires:**

**Information sharing:** Meetings with junior medical interns and nursing students at Glasgow Sick Kids should be undertaken by hospital clowns who work there regularly. Glasgow Sick Kids is a major teaching hospital, so a huge number of student doctors and nurses passing through its doors each year. Many go on to work in children's hospitals across Scotland, where Clowndoctors also visit.

**Teaching electives in Healthcare Clowning:** Developing links with Nursing and Medical Schools in Scotland with a view to setting up elective courses that demonstrate the potential benefits of hospital clowning in a pediatric setting.

**More regular hospital visits:** The positive effect of increased frequency of visits by hospital clowns on the perception of healthcare clowns on the wards, and the potential benefit for all stakeholders, should be discussed with hospital liaison staff and funders.

**Hospital Clowns visit everyone in hospital:** Re-asses where hospital clowns visit each day and when they do so, to make sure that they can have the biggest, most positive impact each time they are there.

**Referrals:** Hospital clowns should be active in offering their attendance at minor medical procedures during the referral process. In this way positive, collaborative relationships can be gradually built with healthcare staff.

**Access:** To staff rooms, and use of staff changing areas should be discussed with hospital liaison staff as an alternative to Hospital Clowns using the volunteer space in the hospital as a base. In addition, Hospital Clowns should be given security passes. It would be a sign of our professionalism and trust and help staff to see clowns as part of the hospital environment.

**Balance the benefits of research into the effects of healthcare clowning with cost and time constraints.**

**This requires:**

**Using existing international research:** The findings of Operação Nariz Vermelho, and other organisations that work in a similar way to Hospital Clown Organisations in the UK, should be used in social media communications and funding applications.

**Developing links:** Start a conversation with the department of Integrative Medicine at The University of Glasgow regarding what a research project might look like, and how it might be undertaken, as scientific weight behind the work of hospital clowns in the UK would be beneficial for funders and as a tool for communicating to the general public.

**Unwavering focus on high artistic quality in the delivery of the hospital clown programme.**

**This Requires:**

**Continuity of partnerships:** UK based hospital Clown organisations should focus on the positive impact of continuity when timetabling visits and contracting their artistic team.

**Regular observations:** Hospital clowns in the UK should have the opportunity to observe their colleagues working on the wards at least once a year. This is artistically inspiring, informative and invigorating.

**Artistic Coaching:** A system of Artistic Coaching should be implemented by UK organisations. Existing links with Paris and other European organisations that use this model should be explored in order to share best practices and training models.

**Costume review:** The doctor parody is essential when creating costumes and characters as hospital clowns. If hospital clown organisations in the UK want to communicate to staff and public that they are not party or circus clowns, then attention should be paid to how we look to the public considering that they encounter us outside of a traditional circus and theatre setting.

**Raise awareness that hospital clowning is a profession to aspire towards, in order to set hospital clowns apart from other arts in health charities and hospital entertainment.**

**This Requires:**

**Public endorsement from medical professionals:** Interviews with medical professionals, streamed on social media platforms and national mainstream media platforms, would raise the profile of hospital clowns in the UK with a different audience.

**Celebrity endorsement:** Celebrity endorsement has the potential to raise the profile of the Hospital Clown movement in the UK.

**Social Media Content:** Hospital Clowns should send videos, photos and stories from their days working on the wards to the marketing manager on a regular basis, so there is a variety of content available to use for targeted social media campaigns.

**National Press and Media campaigns:** Links should be made with media organisations with a view to create content for TV and Radio Spots, leading to nationwide recognition.

**A National Hospital Clown Day:** This would represent a great opportunity for hospital clown organisations to communicate what they do to the general public in a focussed way, especially since a Red Nose Day is not an option for UK hospital Clown organisations.

# IMPACTO

I am hopeful that what I have seen and learned during my Fellowship, and the above recommendations will bring us significantly closer to a model of holistic healthcare in the UK where doctor and clown can work together side by side. I will therefore be actively disseminating my report in the following ways:

- Findings will be shared at the Hearts & Minds Company Consultation in September 2018
- This report will be shared with the Hearts & Minds Board, office and artistic team, Autumn 2018.
- This report will be shared with other UK hospital clown organisations, including Tin Arts and Artlink
- Aim to present findings at the HCIM meeting in Austria, Spring 2018
- The report will be shared on the EFCHO research platform

Should this report be successful in encouraging UK organisations to adopt my recommendations, and based on what I have seen over the course of my Fellowship, I would expect to see the following development in the sector:

- Increased access on hospital wards, to visit children while they are having minor procedures carried out by healthcare staff.
- Increased playfulness and collaboration from staff who have attended information sharing meetings.
- Increased 'Likes' and followers on social media platforms, leading to increased private donations.
- National press coverage of Healthcare clown projects in the UK
- A National Hospital Clown Day.

# APPENDIX

Alegria Intensiva – [www.alegriaintensiva.org.ar](http://www.alegriaintensiva.org.ar)  
 Operação Nariz Vermelho – [www.narizvermelho.pt](http://www.narizvermelho.pt)  
 Le Rire Médecin – [www.leriremedecin.org](http://www.leriremedecin.org)  
 Pallapupas – [www.pallapupas.org](http://www.pallapupas.org)  
 Hearts & Minds – [www.heartsminds.org](http://www.heartsminds.org)  
 EFCHO - <http://www.efhco.eu/home>

## Itinerary:

### 2016

Date	Buenos Aires
23 <sup>rd</sup> August	Hospital de Niños Ricardo Gutiérrez
24 <sup>th</sup> August	Hospital Nacional de Pediatría SAMIC
25 <sup>th</sup> August	Hospital Pedro Elizalde, Casa Cuna
26 <sup>th</sup> August	Centro de Formación de Clown en Hospital
27 <sup>th</sup> August	Centro de Formación de Clown en Hospital
30 <sup>th</sup> August	Dr Andres Kogan, Dr Mariano Rozenburg (Directors of Alegria Intensiva)
31 <sup>st</sup> August	Hospital Nacional de Pediatría SAMIC
1 <sup>st</sup> September	Irene Sexer & Silvina Sznajder (Artistic Directors of Alegria Intensiva)

### 2017

Date	Lisbon
22 <sup>nd</sup> June	Instituto Português de Oncologia (Observation)
23 <sup>rd</sup> June	Magda Ferro (Head of Communications, ONV)
24 <sup>th</sup> June	Susana Ribeiro (Head of Research, ONV)

Date	Paris
25 <sup>th</sup> June	Caroline Simmonds (Artistic Director, Le Rire Médecin)
26 <sup>th</sup> June	Hospital Jean-Verdier, Bondy, Paris (Observation & Meeting with medical interns)
27 <sup>th</sup> June	Hospital Trousseau, Paris (Observation)

Date	Barcelona
10 <sup>th</sup> July	Hospital de Dia de Oncologia (Observation)
	Planta Paediatrica de Cardio y Gastro (Observation)
	Xavi Estrada (Artistic Director)
11 <sup>th</sup> July	Quiròfano Pediatrico Ambulatòrio (Observation)
12 <sup>th</sup> July	Hospital de Dia de Oncologia (Observation)
	Planta Paediatrica (Play)
13 <sup>th</sup> July	Quiròfano Pediatrico Ambulatòrio (Observation)
14 <sup>th</sup> July	Teatro Social and Xavi Estrada

# ○ REFERENCES ○

Nogueira, W (November 2015) O mundo precisa de mais palhaços,  
Retrieved from: <https://www.youtube.com/watch?v=R3F98tFl-zk>

Vagnoli L, Caprilli S (Oct 2005) [Clown doctors as a treatment for preoperative anxiety in children: a randomized, prospective study.](#)  
Retrieved from: <https://www.ncbi.nlm.nih.gov/pubmed/16199685>

Scott s (March 2015) Why We Laugh  
Retrieved from: [https://www.ted.com/talks/sophie\\_scott\\_why\\_we\\_laugh](https://www.ted.com/talks/sophie_scott_why_we_laugh)

Astedt-Kurki P, Liukkonen A. (Jul 1994) Humour in nursing care.  
Retrieved from: <https://www.ncbi.nlm.nih.gov/pubmed/7930119>

BBC Mundo 2015 'Payasos por ley en los hospitales de Buenos Aires'  
[http://www.bbc.com/mundo/noticias/2015/08/150819\\_payasos\\_buenos\\_aires\\_hospitales\\_payamedicos\\_irm](http://www.bbc.com/mundo/noticias/2015/08/150819_payasos_buenos_aires_hospitales_payamedicos_irm)

<http://www.lanacion.com.ar/2016936-artistas-en-el-hospital-para-devolverle-a-los-chicos-la-risa-en-medio-del-trauma>  
April 2017